

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO 10618477 FILING DATE 07-11-03
 APPLICANT(S) _____

CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
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TOTAL IND. <u>1</u> TOTAL DEP. <u>14</u> TOTAL CLAIMS <u>15</u>						
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TOTAL IND. _____ TOTAL DEP. _____ TOTAL CLAIMS _____						